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are on their own, whether they were ever on ADC or not, are allowed, under this bill, to get their...oh, they can anyway, get their own medical insurance in the private sector. Because I have a great concern for not only the cost of these programs, but the continuing encroachment into the private sector insurance industry across the country for those of us who are just above the working poor levels and out there working, trying to afford, those of us who are self-insured, those of us who are small business people, and trying to afford medical insurance for our families. So as you look at covering children, I wanted you to look at 1223, which covers more children, actually covers those children. It's at a little different level here, the 200 percent level requires a spend-down to 185, it covers up to 185, but it doesn't cover the adults in those areas. It still covers pregnant women, up to 150 percent; it still covers all those children that you see on this chart, up to 185 percent. So it increases all of those coverages for children up to 185 percent; it continues with pregnant women at 150 percent of poverty, although their children would be at 185 percent, and it covers children, both who have been on...or families who have been on government programs and families who have never been on a government program. So it is actually a very fair proposal, it is actually, in my opinion, exactly what those individuals who are out here saying that we need coverage for kid care, for those children who are uninsured in the state of Nebraska. And I want you to understand these are uninsured children. These are not children who are not receiving medical care. I asked nearly every individual who was a proponent of these legislations to tell me if there were any children that they knew of who were not receiving medical care in the state of Nebraska. And without exception every single one of those children (sic) said, no, every child that they knew of was receiving medical care, in some cases it was expensive medical care through the emergency room. But this legislation, 1223, which is this amendment that I'm proposing this morning, would take care of that, because it would still cover those children. So those adults who are responsible for those children would still be working a relationship with a family practitioner from the birth of those children, or from the passage of this legislation, they could go ahead and get that relationship started for their children in their family with a family practitioner, just as I have done with my children and a family